Foster Family Home - Deficiency Report

Provider ID:	**1-100081**		
Home Name:	**Elena Sarte, CNA**	**Review ID:**	**1-100081-17**
94-131 Awaia Street		Reviewer:	Deborah Baumgart
Waipahu HI 96797		Begin Date:	5/19/2026

Foster Family Home **Required Certificate** **[11-800-6]**

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.d.1- Unannounced visit made for a 3-bed annual inspection.

CCFFH met all requirements at the time of the inspection.

Compliance Manager — Date 5/19/26

Primary Care Giver — Date 5/19/26